NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx



DLN: 93493015001010

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

OMB No 1545-0047

Open to Public

Department of the Treasury

► The organization may have to use a copy of this return to satisfy state reporting requirements

	r levellue			<u> </u>			•	Inspection						
			lendar yea	r, or tax year beginning 07-01 C Name of organization	L-2008 and ending 06-30-20	09	D Employer i	dentification number						
_	eck if ap dress cha	oplicable	Please use IRS	NORTH IOWA VOCATIONAL CENT	ER INC		42-09517							
_		-	label or	Doing Business As			E Telephone							
_	me char	_	print or type. See				(641) 423	- 3301						
_	al retur		Specific Instruc-	Number and street (or P O box PO BOX 428	ıf maıl ıs not delivered to street addı	ress) Room/suite		pts \$ 3,919,227						
Ter	mınatıoı	n	tions.	10 BOX 420										
- Am	ended r	eturn		City or town, state or country, and MASON CITY, IA 50402	nd ZIP + 4									
App	olication	pending		MASON CITT, IA 30402										
		Ī	F Nan	ne and address of Principal O	fficer	H(a) Is the	s a group retui	rn for						
			•	Becker		affilia		⊤Yes ▼ No						
			PO Box Mason	City,IA 50401		H/h) Ana all	661:-4 :1	4-4 2						
г Та	x-exem	pt status) (3) ◀ (insert no)	(1) or		l affiliates inclu	ded? Yes No st See instructions)						
ıw	eb site	- h-					p Exemption N							
, ,,	CD SICC	F				11(0)								
∢ Typ	e of org	anızatıon	Corporat	ion trust association other	· F	L Year of Fo	rmation 1974	M State of legal domicile IA						
			,											
	T	C												
Pa	rt I	Sumn Briofly d		e organization's mission or m	ost significant activities									
				-	_									
<u> </u>	1		•	_	nabilitation services for persoi ervices	is with disabili	ties Services	include sheltered work						
₹		programs and community-based employment services												
<u>ē</u>	2	Check tl	his box 🗀	if the organization discontinu	ed its operations or disposed	of more than 2	5% of its asse	ets						
sovemance			,		ly (Part VI, line 1a)			13						
			_		joverning body (Part VI, line 1			13						
y) W														
Ē				nployees (Part V, line 2a) .										
Activities &				lunteers (estimate if necessa	• •		6							
4,		_			art VIII, line 12, column (C)									
	ь	Net unre	elated busi	ness taxable income from Fo		7b								
							r Year	Current Year						
a.	8	Contrib	outions and	d grants (Part VIII, line 1h)			73,874	80,866						
Ravenue	9	Progra	m service	revenue (Part VIII, line 2g)			3,938,411 3,801,103							
9 <u>4</u>	10	Investi	ment incor	ne (Part VIII, column (A), lın	es 3, 4, and 7d)		23,993 7,114							
ш	11	Other	evenue (P	art VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)			30,145						
	12		evenue—a	dd lines 8 through 11 (must e	equal Part VIII, column (A), li	ne	4,036,278	3,919,227						
	13	12)	and simila	ar amounts paid (Part IX, colu	umn (A.) lungs 1 2)		4,030,270	3,515,227						
				, , ,	, ,,			0						
	14		•	r for members (Part IX, colur		_								
8	15	Salarie 10)	s, other co	ompensation, employee benef	5-	2,015,632	2,140,313							
Expenses	16a	•	sional fund	raising fees (Part IX, column		25,000	30,000							
÷	ь			penses, Part IX, column (D), line 25		,								
Ω	17			(Part IX, column (A), lines 11	<u> </u>		2,126,035	1,887,383						
	18			add lines 13-17 (must equal		4,166,667	4,057,696							
	19			penses Subtract line 18 from		-130,389	-138,469							
æ 07 æ 04	1.9	Neveill	ie iess ext	Chises Subtract fille to Holli	mic IZ	Posin-:	,	End of Year						
ម៉្ម	3.5	T - 4 4	t- /-	+ V . I		Бедіппі	ng of Year							
Net Assets of Fund Bafances	20			t X, line 16)			2,545,075	2,346,246						
둏	21	Total lı	abilities (F	Part X, line 26)			397,829	407,416						
žĽ	22	Netas	sets or fun	d balances Subtract line 21	from line 20		2,147,246	1,938,830						
Pai	rt II	Signa	ature Blo	ock										
					ed this return, including accompanying frequency in the preparer (other than officer) is bas									
Plea		l.		correct, and complete Declaration of	ı		arei ilas arīy kriowieuge							
Sign		***** Signa	** ture of office	er	-01-15									
Her														
			RY BECKER or print nam	e and title										
		 			Date	Chack of	Droppers/- DTI	V /Soo Con Tret \						
		Preparer's signature		: KruckenbergCPA	Date 2010-01-15	Check if self-	Preparer's PTI	N (See Gen Inst)						
Paid	.		<u> </u>			empolyed 🕨 🦵								
_	arer's	Firm's na if self-em	me (or yours	Williams & Associates PLC			EIN Þ							
Jse (Jnly		and ZIP + 4	PO Box 410										
				Mason City, IA 504020410	Phone no 🕨	Phone no 🕨 (641) 423-3180								

May the IRS discuss this return with the preparer shown above? (See instructions) . .

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization	n's mission			
	The Center provides vocational employment services	al training and rehabilitation ser	vices for persons with disabilities Se	ervices include sheltered work programs	and community-based
2	Did the organization und the prior Form 990 or 9		ogram services during the ye	ar which were not listed on	Yes ▼ No
	If "Yes," describe these	new services on Schedul	le O		
3	Did the organization ceaservices?	_	ignificant changes in how it c	onducts any program	Yes 🔽 No
	If "Yes," describe these	changes on Schedule O			
4	Section 501(c)(3) and ((4) organizations and 494		e largest program services by exported by export the amount of grants and rted	
4a	(Code) (Expenses \$	3,555,275 including grants of \$) (Revenue \$	3,801,102)
	The Center provides vocation employment services for ap	onal training and rehabilitation s oproximately 325 persons	services for persons with disabilities	Services include sheltered work prograi	ns and community-based
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program service (Expenses \$	s (Describe in Schedule including	O) grants of \$) (Revenue \$)
4e	Total program service	expenses \$ 3	3,555,275 Must equal Part I	X, Line 25, column (B).	

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Νο
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		N o
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 2			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4.	V	
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
_	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	J.J.		
	Tax Shelter Transaction?	5с		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		Νo
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7: 7g	Yes	110
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	<i>7</i> 9	165	
	required?	7h	Yes	
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
Б	facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management	

			Yes	No			
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, $processes$, or changes in Schedule O. See instructions.						
1a	Enter the number of voting members of the governing body 13	3					
Ь	Enter the number of voting members that are independent 1b 1:	3					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	Yes				
6	Does the organization have members or stockholders?						
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	the governing body?	8a	Yes				
ь	each committee with authority to act on behalf of the governing body?	8b	Yes				
9a	Does the organization have local chapters, branches, or affiliates?	9a		No			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b					
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes				
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No			

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a		Νo
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website.

 upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

SHERRY BECKER 1225 S HARRISON MASON CITY,IA 50401 (641) 423-3301

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's current officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees Enter -0 - in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	on a Institutional Trustee	chec pply)	Highes employ	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Sherry Becker , Executive Director	40 00				Х	Х		73,778	0	0
Robert Amosson , Director	1 00							0	0	0
Michael Stensrud , Director	1 00							0	0	0
Rolf Aronsen , Director	1 00							0	0	0
Diane Fischels , Director	1 00	Х						0	0	0
Florence Greiman , Director	1 00							0	0	0
Dennis May , Director	1 00	X						0	0	0
Ruth Miller , Director	1 00	Х						0	0	0
Jerry Plagge , Director	1 00	Х						0	0	0
Tim Schupick , Director	1 00	Х						0	0	0
Leo Staudt , Director	1 00	Х						0	0	0
Robert Marreel , Director	1 00							0	0	0
Roberta Van DeWalker , Director	1 00							0	0	0
Bruce Wuttke , Director	1 00	Х						0	0	0

Part VIII Continued

(A) Name and Title	(B) Average hours per week	Po Individual Trustaa or Dreator	ррІ	y) (香	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total						-	73,778	3	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization►

			Yes	No_
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
2 Total number of independent contractors (including those in 1) who received more than \$	100,000 in compensation	

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	14-	F. d 4-	33,948		Revenue		512, 513, or 514
ats ste	1a b	Federated campaigns 1a Membership dues					
Contributions, gifts, grants and other similar amounts	c	1b Fundraising events					
iits, ⊪an	d	1c Related organizations1d					
s, gi	e	Government grants (contributions) 1e					
tion ar si	f	All other contributions, gifts, grants, and similar amounts not included above	46,918				
e in the second		1f					
ž di	g	Noncash contributions included in lines 1a-1f \$					
Ų .v	h	Total (Add lines 1a-1f)	· · · · .	80,866			
			Business Code				
entié	2a	Work program	900,099	2,483,658	, ,		
Rev	Ь	Community-based employment	900,099	1,317,444	1,317,444		
МСе	c d						
æ	e						
Program Serwoe Revenue	f	All other program service revenue					
P	g	Total. Add lines 2a-2f					
	3	Investment income (including divi	dends, ınterest				
		other similar amounts)		7,114			7,114
	4	Income from investment of tax-exempt be	ond proceeds				
	5	Royalties					
	6a	(1) Real Gross Rents	(11) Personal				
	ь	Less rental					
	c	expenses Rental income					
	d	or (loss) Net rental income or (loss)					
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of					
		assets other than inventory					
	ь	Less cost or other basis and					
	c	sales expenses Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising	. •				
		events (not including					
ще		sof contributions reported on line					
Other Revenue		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
Ϋ́.		\$15,000 a					
the	С	Less direct expensesb Net income or (loss) from fundrais	ing events				
0	9a	Gross income from gaming					
		activities See part IV, line 19					
		Complete Schedule G If total exceeds \$15,000					
	١.	a					
	С	Less direct expensesb Net income or (loss) from gaming a	activities				
	10a	Gross sales of inventory, less	.				
		returns and allowances .					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of					
	11a	Miscellaneous Revenue Theft recovery	Business Code 900,099	30,145			30,145
	ь	пен тесочету					1
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total Revenue. Add lines 1h, 2g, 3	\$ 30,145 . 4. 5. 6d. 7d.	3,919,227	3,801,102		37,259
		8c, 9c, 10c, and 11e					
	1	, , , ===					

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraısıng expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	·		•
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	73,778		73,778	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,743,400	1,599,158		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	162,192	134,511	27,681	
10	Payroll taxes	160,943	133,476	27,467	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	17,802		17,802	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	30,000			30,000
f	Investment management fees	0			
g	Other	4,335		4,335	
12	Advertising and promotion	6,903		6,903	
13	Office expenses	10,630	4,973	5,657	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	122,767	100,683	22,084	
17	Travel	49,382	43,440	5,942	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	0			
20	Interest	9,911	9,911		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	99,591	77,778	21,813	
23	Insurance	29,235	27,344	1,891	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Production materials	1,352,357	1,352,357		
b	Staff development	17,025		17,025	
c	Production related expenses	36,531	36,531		
d	Bad debts	42,854		42,854	
e	Administration	28,153	7,620	20,533	
f	All other expenses	59,907	27,493	32,414	
25	Total functional expenses. Add lines 1 through 24f	4,057,696	3,555,275	472,421	30,000
26	Joint Costs. Check Tiffollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		•		•

Part X	Balance	Shoot
	Balance	Sneer

					(A) Beginning of year			3) fyear
	1	Cash—non-interest-bearing			72,992	-		65,371
	2	Savings and temporary cash investments			34,744	2		35,507
	3	Pledges and grants receivable, net			35,525	3		37,361
	4	Accounts receivable, net			305,318	4		333,531
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L		5				
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	1958(f)(1)) and		6			
	7	Notes and loans receivable, net		7				
	8	Inventories for sale or use			19,963	8		28,561
2	9	Prepaid expenses and deferred charges			37,152	9		39,815
Assets	10a	Land, buildings, and equipment cost basis	10a	3,012,429				
•	ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10b	1,324,022	1	10c		1,688,407
	11	Investments—publicly traded securities			230,654	11		117,693
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D	of		12		,	
	13	Investments—program-related See Part IV, line 11 Complete Part IV, line IV,			13			
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			56,229	15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			2,545,075	+		2.346,246
	17	Accounts payable and accrued expenses .			229,298	17		249,304
	18	Grants payable				18		
	19	Deferred revenue			19			
	20	Tax-exempt bond liabilities				20		
eS.	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u> </u>		persons Complete Part II of Schedule L		•		22		
	23	Secured mortgages and notes payable to unrelated third parties			168,531	23		158,112
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			397,829	26		407,416
		Organizations that follow SFAS 117, check here ▶ $\overline{\lor}$ and complethrough 29, and lines 33 and 34.	ete lin	es 27				
Balance	27	Unrestricted net assets			2,123,021	27		1,912,769
ල ල	28	Temporarily restricted net assets			24,225	28		26,061
ă	29	Permanently restricted net assets				29		
r Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	d comp	lete				
S Of	30	Capital stock or trust principal, or current funds				30		
Şet	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
Assets	32	Retained earnings, endowment, accumulated income, or other fur				32		
Net	33	Total net assets or fund balances			2,147,246	33		1,938,830
<u>z</u>	34	Total liabilities and net assets/fund balances			2,545,075	34		2,346,246
Рa	rt XI	Financial Statements and Reporting						
							Yes	No

Dart YT	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		Νο
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		e organizati						Em	ployer ide	nt if icat io	n number	
NORT	H IOWA	VOCATIONAL (LENTER INC					12	-095175	7		
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganizatio					
				ation because it is (Please					111001000			
1	Ē			nurches, or association of ch					(A)(i).			
2	,	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	Ţ.			e hospital service organizati			t ion 170(l	o)(1)(A)(i	ii). (Attac	h Schedu	le H)	
4	,	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the										
	•		name, city, and	,		•			. , ,			
5	Г	•		for the benefit of a college or	universit	y owned o	roperated	l by a gove	rnmental	unıt desc	rıbed ın	
	•			(Complete Part II)		•	•	, ,				
6	Г			overnment or governmental	unıt descr	ıbed ın Se	ction 170	(b)(1)(A)	(v).			
7	Ė	•		ally receives a substantial p						n the gene	ral public	
	·	=)(1)(A)(vi) (Complete Par						-	•	
8	Г		-	ped in Section 170(b)(1)(A)	•	plete Par	tII)					
9	<u> </u>		•	ally receives (1) more than		•	•	ontribution	ns, membe	rship fees	, and gross	
		receipts fro	om activities re	lated to its exempt functions	s—subject	to certair	nexceptio	ns, and (2) no more	than 331/	'3% of	
		ıts support	from gross inv	estment income and unrelate	ed busines	s taxable	ıncome (l	ess section	on 511 ta:	x) from bu	sinesses	
		acquired by	y the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ction 509	(a)(4). (S	ee instruc	tions)	
11	Γ	Anorganiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purposes	of
				orted organizations describe						Section 5	09(a)(3). Cl	neck
		the box that describes the type of supporting organization and complete lines 11e through 11h a										
•	_	•	• •	rtify that the organization is			-		d Spa or mor			
е	,	•		agers and other than one or			•			•	•	
		section 50		- 9		,	3				(/(-/	
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organizati	on,
		check this		as the organization accepted	d any gift.	or contrib	ution from	any of the				ı
g		following pe		as the organization accepted	u any gni	or continu	ution nom	ally of the	:			
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes 1	No OF
		and (III) be	low, the govern	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a family	y member of a p	erson described in (i) above	,?					11g(ii)	
		(iii) a 35%	controlled ent	ty of a person described in ((ı) or (ıı) al	bove?				11g(iii)	
h		Provide the	following infor	mation about the organizatio	ns the org	janızatıon	supports					
							,					
		ame of	(ii) EIN	(iii) Type of organization	(iv) I			ou notify		s the	(vii) A mou	
		orted IIzation		(described on lines 1-9 above or IRC section	-	ation in Iisted in		inization i) of your		ation in organized	support	.7
	Organ	112411011		(See Instructions))	yourgo			ort?		US?		
					docur	ment?						
		Yes No Yes No										
					I	l	I	I				

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support				_			
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3							
5	·							
	person (other than a government unit or publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	(f)							
6	Public Support subtract line 5 from line							
T	otal Support			1				<u> </u>
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
	Amounts from line 4	(=) = = = :	(=,====	(-)	(,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		(1) 1 1 1 1 1
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)			12		
13	First Five Years. If the Form 990 is for the	=	irst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3)	_
	organization, check this box and stop here							▶ ┌
C	omputation of Public Support Perc	entage						
	Public Support Percentage for 2008 (line 6		ded by line 11 c	olumn (f))		14		0 %
15	Public Support Percentage for 2007 Scheo		•	(-//		15		• • • • • • • • • • • • • • • • • • •
	33 1/3% Test - 2008. If the organization di			and line 14 is 3	3 1/3% or more		this hox	
-04	and stop here. The organization qualifies a		,		5 1,570 OF MOTE,	CHCCK	CIIIS DOX	▶ □
ь	33 1/3% Test - 2007. If the organization di				15 is 33 1/3% d	r more	, check th	·
	box and stop here. The organization qualifi	es as a publicly	supported organ	nızatıon				► □
17a	10% Facts and Circumstances Test - 2008.	-						
	more, and if the organization meets the "fa							
h	organization meets the "facts and circums 10% Facts and Circumstances Test - 2007.							▶ □
U	more, and if the organization meets the "fa							
	the organization meets the "facts and circu		·					_
18	Private Foundation. If the organization did		=	•			-	·
	instructions							▶ ┌

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you check	Cu the box of	Tillie 5 Of Fait	L 1.)				
Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not	220,491	49,810	64,670	73,874		80,866	489,711
	ınclude any "unusual grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services performed,	4 660 004	2.050.073	2.045.220	2 020 444		2 004 402	47.004.546
	or facilities furnished in any activity that	1,668,831	3,950,973	3,845,229	3,938,411		3,801,102	17,204,546
	ıs related to the organization's tax-							
	exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business under							
_	section 513						+	
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
-	The value of services or facilities						+	
5	furnished by a governmental unit to the							
	organization without charge							
6	Total Add lines 1-5	1,889,322	4,000,783	3,909,899	4,012,285		3,881,968	17,694,257
	Amounts included on lines 1, 2, and 3	_,,	.,,	2,222,222	.,,			
/a	received from disqualified persons							
h	A mounts included on lines 2 and 3							
	received from other than disqualified							
	persons that exceed the greater of 1% of	829,444	1,725,684	1,676,474	1,839,112		1,701,984	7,772,698
	the total of lines 9, 10c, 11, and 12 for							
	the year or \$5,000							
С	Total of lines 7a and 7b	829,444	1,725,684	1,676,474	1,839,112		1,701,984	7,772,698
8	Public Support (Substract line 7c from							0.024 FF0
_	line 6)							9,921,559
	tal Command							
10	tal Support							
	tal Support ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
		(a) 2004 1,889,322	(b) 2005 4,000,783	(c) 2006 3,909,899	(d) 2007 4,012,285	(e)	2008	(f) Total 17,694,257
Cale 9	ndar year (or fiscal year beginning in)					(e)		
Cale	ndar year (or fiscal year beginning in) A mounts from line 6	1,889,322	4,000,783	3,909,899	4,012,285	(e)	3,881,968	17,694,257
Cale 9	Amounts from line 6 Gross income from interest, dividends,					(e)		17,694,257
Cale	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans,	1,889,322	4,000,783	3,909,899	4,012,285	(e)	3,881,968	17,694,257
Cale	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less	1,889,322	4,000,783	3,909,899	4,012,285	(e)	3,881,968	17,694,257 81,948
Cale: 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	1,889,322	4,000,783	3,909,899	4,012,285	(e)	3,881,968	17,694,257
Cale: 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0
Cale: 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b	1,889,322	4,000,783	3,909,899	4,012,285	(e)	3,881,968	17,694,257 81,948
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0 81,948
Cale 9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0 81,948
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	7,114	17,694,257 81,948 0 81,948
Cale 9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	3,881,968 7,114	17,694,257 81,948 0 81,948
Cale 9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	7,114	17,694,257 81,948 0 81,948 0 30,145
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and	1,889,322 5,717	4,000,783 20,745	3,909,899 24,379	4,012,285 23,993	(e)	7,114	17,694,257 81,948 0 81,948
Cale 9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	1,889,322 5,717 5,717	20,745 20,745	24,379 24,379	23,993 23,993		3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the o	1,889,322 5,717 5,717	20,745 20,745	24,379 24,379	23,993 23,993		3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Cale 9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	1,889,322 5,717 5,717	20,745 20,745	24,379 24,379	23,993 23,993		3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350
Caler 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the o	1,889,322 5,717 5,717 rganization's fir	20,745 20,745	24,379 24,379	23,993 23,993		3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Caler 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	1,889,322 5,717 5,717 rganization's fir	4,000,783 20,745 20,745 st, second, third	3,909,899 24,379 24,379	23,993 23,993		3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Caler 9 10a b c 11 12 13 14 Co 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Perce	1,889,322 5,717 5,717 rganization's fir	4,000,783 20,745 20,745 st, second, third	3,909,899 24,379 24,379	23,993 23,993	01(c)(3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Cale 9 10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	1,889,322 5,717 5,717 rganization's fir	4,000,783 20,745 20,745 st, second, third	3,909,899 24,379 24,379	23,993 23,993	01(c)(3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Caler 9 10a b c 11 12 13 14 Co 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percet Public Support Percentage for 2008 (line 8	1,889,322 5,717 5,717 5,717 entage column (f) dividule A , Part IV - A	4,000,783 20,745 20,745 st, second, third	3,909,899 24,379 24,379	23,993 23,993	01(c)(3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,
Caler 9 10a b c 11 12 13 14 Co 15 16 Co	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Perce	1,889,322 5,717 5,717 5,717 entage column (f) dividule A , Part IV - A	4,000,783 20,745 20,745 st, second, third ed by line 13 cc	3,909,899 24,379 24,379	23,993 23,993 23,993	01(c)(3,881,968 7,114 7,114 30,145	17,694,257 81,948 0 81,948 0 30,145 17,806,350 ation,

Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h

17	0 460	%
18	0 520	%

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions



►V

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Supplemental Financial Statements

Department of the Treasury

SCHEDULE D (Form 990)

> ▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

nterna	l Revenue Service	answered res, tore	51111 990, Part 14, line 0, 7, 8, 9, 10, 11, 01 1		Inspection
	me of the organi			Employer identifi	cation number
		THE SERVER AND		42-0951757	
Pa		nizations Maintaining Donor Ac zation answered "Yes" to Form 99	dvised Funds or Other Similar Fu	ınds or Accoun	ts. Complete ıf
	Ul yaili.	zadon answered Tes to Form 99	(a) Donor advised funds	(b) Funds and	l other accounts
1	Total number a	at end of year	(u) I am u a ma a ma a ma a ma a ma a ma a	(2)	
2	Aggregate Con	itributions to (during year)			
3	Aggregate Gra	nts from (during year)			
4	Aggregate valu	ue at end of year			
5			sors in writing that the assets held in dono organization's exclusive legal control?	or advised	┌ Yes ┌
6	used only for c		donor advisors in writing that grant funds efit of the donor or donor advisor or other	may be	┌ Yes ┌
Pa	rt III Conse	ervation Easements. Complete	ıf the organızatıon answered "Yes" to	Form 990, Part	IV, line 7.
2	Protection Preservat Complete lines	ion of land for public use (e g , recreating of natural habitat ion of open space s 2a–2d if the organization held a quali y of the tax year		historically importa rtified historic struc of a conservation e	ture
	on the last au,	, 0, 1,,0		Held a	at the End of the
а	Total number	of conservation easements		2a	
b	Total acreage	e restricted by conservation easement	s	2b	
c	Number of co	nservation easements on a certified hi	storic structure included in (a)	2c	
d	Number of co	nservation easements included in (c) a	acquired after 8/17/06	2d	
3	Number of con	servation easements modified, transfe	rred, released, extinguished, or terminate	d by the organizatio	n during
	the taxable ye	ar ►			
1	Number of stat	tes where property subject to conserva	ation easement is located ►		
5	_	nızatıon have a wrıtten policy regardıng f the conservatıon easements it holds?	g the periodic monitoring, inspection, viola	tions, and	┌ Yes ┌
6	Staff or volunte	eer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►	
7	A mount of exp	enses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ar ►\$	
8	Does each cor	nservation easement reported on line 2	(d) above satisfy the requirements of sec	tion	_
	170(h)(4)(B)(ı) and 170(h)(4)(B)(II)?			Yes
9	balance sheet,		onservation easements in its revenue and the footnote to the organization's financial nents		
Par	Compl	ete if the organization answered '	ns of Art, Historical Treasures, ('Yes" to Form 990, Part IV, line 8.		
1a	art, historical t	treasures, or other sımılar assets held	116, not to report in its revenue stateme for public exhibition, education or researc ancial statements that describes these it	h in furtherance of i	
b	historical treas	· ·	116, to report in its revenue statement a public exhibition, education, or research ir		•
	(i) Revenues i	included in Form 990, Part VIII, line 1		► \$	
	(ii) Assets Inc	luded in Form 990, Part X		F \$	
2		tion received or held works of art, historics into required to be reported under SFA	orical treasures, or other similar assets fo S 116 relating to these items	r financial gain, pro	vide the
а	Revenues incli	uded in Form 990, Part VIII, line 1		► \$	
ь	A seats include	ad in Form 990 Part Y		b ¢	

لللنم	••• Organizations Maintaining Collec	ctions of Art, His	tuii	cai iicasu	ics, or othe	. Oa. 7.55	(ontinueu)
	Using the organization's accession and other recitems (check all that apply)	ords, check any of th	ne fol	lowing that ar	e a sıgnıfıcant u	se of its collection	n	
а	Public exhibition	d	Γ	Loan or exc	hange programs			
b	Scholarly research	e	Γ	O ther				
c	Preservation for future generations							
4	Provide a description of the organization's collect Part XIV	tions and explain hov	w the	y further the o	organization's ex	empt purpose in		
5	During the year, did the organization solicit or re assets to be sold to raise funds rather than to be						Yes	┌ No
Par	Part IV, line 9, or reported an amou				ınızatıon answ	ered "Yes" to I	orm 9	90,
	Is the organization an agent, trustee, custodian included on Form 990, Part X?	or other intermediary	for c	ontributions (or other assets r		Yes	┌ No
b	If "Yes," explain why in Part XIV and complete t	he following table						
						A mo	unt	
с	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f	_		
	Did the organization include an amount on Form	990, Part X, line 21?				Г	Yes	✓ No
	If "Yes," explain the arrangement in Part XIV							
Par							\= \	
4 -		a)Current Year (b)Prior '	Year (c) I w	o Years Back (d)	Three Years Back (e) Four Y	ears Back
1a L	Beginning of year balance							
b	Contributions							
_	Investment earnings or losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year en	d balance held as						
а	Board designated or quasi-endowment							
ь	Permanent endowment							
С	Term endowment ▶							
	Are there endowment funds not in the possessio	n of the organization	thata	are held and a	dministered for	the		
	organization by	•					Yes	No
	(i) unrelated organizations					3a(i)		<u> </u>
	(ii) related organizations					3a(ii	۱ I	1
						1	' 	
	If "Yes" to 3a(II), are the related organizations II	•				3b		
4	Describe in Part XIV the intended uses of the or	ganızatıon's endowm	ent fu	ınds		3b		
	Describe in Part XIV the intended uses of the or	ganızatıon's endowm	ent fu See F	inds Form 990, Pa	•	Зь	<u></u>	
4	Describe in Part XIV the intended uses of the or	ganızatıon's endowm	ent fu See F	ınds	art X, line 10. (b)Cost or other basis (other)	(c) Depreciation		pok value
4 Part	Describe in Part XIV the intended uses of the or Investments—Land, Buildings, a	ganızatıon's endowm	ent fu See F	orm 990, Pa	(b)Cost or other			
4 Part	Describe in Part XIV the intended uses of the or Investments—Land, Buildings, a Description of investment	ganızatıon's endowm	ent fu See F	orm 990, Pa	(b)Cost or other basis (other)			188,007
4 Part 1a L b B	Describe in Part XIV the intended uses of the or VI Investments—Land, Buildings, a Description of investment and	ganızatıon's endowm	ent fu See F	orm 990, Pa	(b)Cost or other basis (other) 188,007	(c) Depreciation		188,007
1a L b B c L	Describe in Part XIV the intended uses of the or VI Investments—Land, Buildings, a Description of investment and	ganızatıon's endowm	ent fu See F	orm 990, Pa	(b)Cost or other basis (other) 188,007	(c) Depreciation		188,007
1a L b B c L d E	Describe in Part XIV the intended uses of the or VI Investments—Land, Buildings, a Description of investment and	ganization's endowmond Equipment. S	ent fu Gee F (a) bas	orm 990, Page 1990, Pa	(b)Cost or other basis (other) 188,007 2,320,372	(c) Depreciation 948,372		188,007 1,402,992

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

Par	t XI Reconciliation of C	hange in Net Assets from Fori	m 990) to Fi	nancial Statem	ents	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)				1	3,919,227
2	Total expenses (Form 990, Par	t IX, column (A), line 25)				2	4,057,696
3	Excess or (deficit) for the year	Subtract line 2 from line 1				3	-138,469
4	Net unrealized gains (losses) o	n investments				4	-69,947
5	Donated services and use of fa					5	
6	Investment expenses					6	
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	
9	Total adjustments (net) Add lir	nes 4 - 8				9	-69,947
10	• • • • • • • • • • • • • • • • • • • •	per financial statements Combine line	s 3 and	d 0		10	,
		evenue per Audited Financial			s With Revenue		
1		r support per audited financial					3,919,227
	statements					1	
2		t not on Form 990, Part VIII, line 12	1	1			
а	Net unrealized gains on invest		•	2a		_	
b	Donated services and use of fa		.	2b		4	
С	Recoveries of prior year grants		.	2c		_	
d	Other (Describe in Part XIV)		[2d		_	
е	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1 .					3	3,919,227
4		0, Part VIII, line 12, but not on line 1	1	_ 1			
а		uded on Form 990, Part VIII, line 7b	•	4a		_	
Ь	Other (Describe in Part XIV)		. [4b		4 _	
_ C	Add lines 4a and 4b					4c	
5		d 4c. (This should equal Form 990, Par				5	3,919,227
1		xpenses per Audited Financia audited financial statements				1	4,127,643
2	·	t not on Form 990, Part IX, line 25	•			\ -	1,127,013
- a	Donated services and use of fa			2a			
b	Prior year adjustments			2b		_	
c	, ,	Part IX, line 25		2c			
d				2d	69,94	.7	
e	Add lines 2a through 2d						69,947
3	-					3	4,057,696
4		D, Part IX, line 25, but not on line 1:					, ,
а		uded on Form 990, Part VIII, line 7b		4a			
ь				4ь			
c	Add lines 4a and 4b					4c	
5	Total expenses Add lines 3 ar	ıd 4c. (Thıs should equal Form 990, Pa	rt I, lın	ne 18)		. 5	4,057,696
Par	t XIV Supplemental Inf	ormation				.	
		scriptions required for Part II, lines 3, Part XII, lines 2d and 4b, and Part XI				Part XI	V, lines 1b and 2b,
	Ident if ier	Return Reference			Explan	at ion	
XIII		2 d	Unreal	lized los	s on marketable se		69.947
		 -	3 Cal		2 III Marketable 3e	- 4176103	

XIII	2 d	Unrealized loss on marketable securities 69,947
		Schedule D (Form 990) 2008

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493015001010

OMB No 1545-0047

2008

Open to Public Inspection

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization NORTH IOWA VOCATIONAL CENTER INC

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- Indicate whether the organization raised funds through any of the following activities Check all that apply
- a Mail solicitations
- **b** Email solicitations
- **c** Γ Phone solicitations
- d In-person solicitations

- e ▼ Solicitation of non-government grants
- f 🔽 Solicitation of government grants
- g | Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?
 - the fundraiser is

Employer identification number

42-0951757

No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) DId fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
Lisa Yunek	solicitation of grants		No	46,918	30,000	16,918
Total	1	1	<u> </u>			

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Tot (Add col		
			(event type)	(event type)	(total number)		(0)	
至	1	Gross receipts						
Revenue	2	Less Charitable contributions						
	3	Gross revenue (line 1 minus line 2)						
	4	Cash Prizes						
s မိ	5	Non-cash Prizes						
Expenses	6	Rent/Facility costs						
	7	Other direct expenses						
Direct	8	Direct expense summary Add lin	es 4 through 7 ın columr	n(d)	🛌			
	9	Net income summary Combine li	·	-				
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	orted more	e than	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total col (a) thr		
<u>~</u>	1	Gross revenue						
မ မ	2	Cash prizes						
pens	3	Non-cash prizes						
Direct Expenses	4	Rent/facility costs						
₽ B	5	Other direct expenses						
	6	Volunteer labor	☐ Yes% ☐ No	┌ Yes%	┌ Yes%			
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in col	umn (d)	🕨			
9		er the state(s) in which the organiza the organization licensed to operate		·		· 9a	Yes	No
a		No," Explain						
	If"	, ,						
a b	— We	re any of the organization's gaming l Yes," Explain	icenses revoked, suspe	nded or terminated during	g the tax year?	10a		
a b 10a	Wei	re any of the organization's gaming l				10a		

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name	of t	t he	orga	nizat	ion	
NORTH	IOV	VA V	OCĀTI	ONAL	CENTER	INC

Employer identification number

42-0951757

Identifier	Return Reference	Explanation
990 VI	15b	There is an annual salary evaluation for the executive director performed by the board of

ldentifier	Return Reference	Explanation
990 VI	15b	directors Salaries for comparable positions at other non-profit organizations are used

ldentifier	Return Reference	Explanation
990 VI	15b	as a basis for comparison

	ldentifier	Return Reference	Explanation	
I	990 VI	19	The organizations governing documents and financial statements are made available	

ldentifier	Return Reference	Explanation	
990 VI	19	to the public upon request	

ldentifier	Return Reference	Explanation	
990 VI	5	During the year ended June 30, 2009, the organization became aware that the finance	

Identifier	Return Reference	Explanation	
		manager had embezzled in excess of 10,000 over the last seven years of operations	

Identifier	Return Reference	Explanation
		This employee immediately resigned from the organization when confronted with the

ldentifier	Return Reference	Explanation	
		theft The organization received approximately half of the amount in recovery under an	

ldentifier	Return Reference	Explanation	
		insurance policy. The employee involved has been ordered by the courts to repay	

Ī	ldentifier	Return Reference	Explanation	
			restitution for the remainder. The organization has eliminated a number of cash	

ldentifier	Return Reference	Explanation	
		accounts and changed its internal control system in order to better safeguard assets	

ldentifier	Return Reference	Explanation
		ın the future

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Cat No 51056K

Schedule O (Form 990) 2008